

PTO/SB/01 (08-03)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

UNI 1773-011

First Named Inventor

Ted Naimer, et al.

COMPLETE IF KNOWN

Application Number

10/662,485

Filing Date

09/15/2003

Art Unit

2632

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Non Linear Tape Display

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

09/15/2003

as United States Application Number or PCT International

Application Number

10/662,485

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

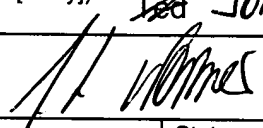
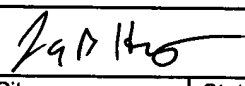
[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: 08698		OR <input type="checkbox"/> Correspondence address below	
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) JOACHIM LAURENZ		Family Name or Surname Naimer	
Inventor's Signature 			Date
Residence: City ASCONA	State TI	Country SWITZERLAND	Citizenship SWISS
Mailing Address VIA MOSCIA 118			
City ASCONA	State TI	ZIP CH 6612	Country SWITZERLAND
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Sam		Family Name or Surname Hyatt	
Inventor's Signature 			Date 3/25/04
Residence: City Alpharetta	State Ga	Country USA	Citizenship USA
Mailing Address 305 Riversong Way			
City Alpharetta	State Ga	ZIP 30022	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			



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DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental SheetPage 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jim		Brannen	
Inventor's Signature <i>Jim Brannen</i>		Date <i>25 March 2004</i>	
Residence: City <i>LAWRENCEVILLE</i>	State <i>GA</i>	Country <i>USA</i>	Citizenship <i>USA</i>
Mailing Address <i>1854 JENNA LYN CT.</i>			
Mailing Address			
City <i>LAWRENCEVILLE</i>	State <i>GA</i>	Zip <i>30043</i>	Country <i>USA</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Tom		Lawrence	
Inventor's Signature <i>Tom Lawrence</i>		Date <i>25 March 2004</i>	
Residence: City <i>KNOXVILLE</i>	State <i>TN</i>	Country <i>UNITED STATES</i>	Citizenship <i>US</i>
Mailing Address <i>405 Ocala DRIVE</i>			
Mailing Address			
City <i>KNOXVILLE</i>	State <i>TN</i>	Zip <i>37918</i>	Country <i>UNITED STATES</i>
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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PTO/SB/81 (09-03)

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/662,485
Filing Date	09/15/2003
First Named Inventor	Ted Naimer, et al.
Title	Non Linear Tape Display
Art Unit	2632
Examiner Name	
Attorney Docket Number	UNI 1773-011

I hereby appoint:

☒ Practitioners associated with the Customer Number:

08698

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ Firm or
Individual Name

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Country

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Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name Ted Naimer

Signature

Date

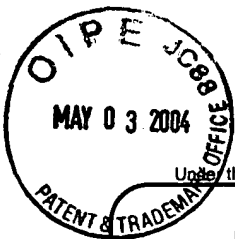
Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 4 forms are submitted.

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<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		Zip	
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Sam Hyatt		
Signature			
Date	3/25/04	Telephone	770-993-2047

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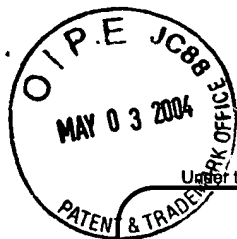
Name	Jim Brannen			
Signature				
Date	25 MARCH 2004	Telephone	770 242 7466	

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Tom Lawrence		
Signature			
Date	25 March 2004	Telephone	(165) 617-6118

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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